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Application Data Sheet 37 CFR 1.76		Attorney Docket Number	30817-1008-CIP
		Application Number	
Title of Invention	Synthetic Heparin-Binding Growth Factor Analogs		
<p>The application data sheet is part of the provisional or nonprovisional application for which it is being submitted. The following form contains the bibliographic data arranged in a format specified by the United States Patent and Trademark Office as outlined in 37 CFR 1.76.</p> <p>This document may be completed electronically and submitted to the Office in electronic format using the Electronic Filing System (EFS) or the document may be printed and included in a paper filed application.</p>			

Secrecy Order 37 CFR 5.2

- ☐ Portions or all of the application associated with this Application Data Sheet may fall under a Secrecy Order pursuant to 37 CFR 5.2 (Paper filers only. Applications that fall under Secrecy Order may not be filed electronically.)

Applicant Information:

Applicant 1					
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
				<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix	
	Louis	A.	Pena		
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Poquott	State/Province	NY	Country of Residence	US
Citizenship under 37 CFR 1.41(b)		US			
Mailing Address of Applicant:					
Address 1		103 Van Brunt Manor Road			
Address 2					
City	Poquott	State/Province	NY		
Postal Code	11733	Country	US		
Applicant 2					
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
				<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix	
	Paul	O.	Zamora		
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Gaithersburg	State/Province	MD	Country of Residence	US
Citizenship under 37 CFR 1.41(b)		US			
Mailing Address of Applicant:					
Address 1		18321 Winter Park Road			
Address 2					
City	Gaithersburg	State/Province	MD		
Postal Code	20879	Country	US		
Applicant 3					
Applicant Authority		<input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
				<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name	Suffix	
	Xinhua		Lin		
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service					
City	Plainview	State/Province	NY	Country of Residence	US

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Citizenship under 37 CFR 1.41(b)		US	
Mailing Address of Applicant:			
Address 1		33 Woodwaye Road	
Address 2			
City	Plainview	State/Province	NY
Postal Code	11803	Country	US
Applicant 4			
Applicant Authority <input checked="" type="radio"/> Inventor		<input type="radio"/> Legal Representative under 35 U.S.C. 117	
		<input type="radio"/> Party of Interest under 35 U.S.C. 118	
Prefix	Given Name	Middle Name	Family Name
	John	D.	Glass
Residence Information (Select One) <input checked="" type="radio"/> US Residency <input type="radio"/> Non US Residency <input type="radio"/> Active US Military Service			
City	Shoreham	State/Province	NY
		Country of Residence	US
Citizenship under 37 CFR 1.41(b)		US	
Mailing Address of Applicant:			
Address 1		94 Highland Down	
Address 2			
City	Shoreham	State/Province	NY
Postal Code	11786	Country	US
All Inventors Must Be Listed - Additional Inventor Information blocks may be generated within this form by selecting the Add button. Add			

Correspondence Information:

Enter either Customer Number or complete the Correspondence Information section below. For further information see 37 CFR 1.33(a).			
<input type="checkbox"/> An Address is being provided for the correspondence Information of this application.			
Customer Number	05179		
Email Address	info@peacocklaw.com	Add Email	Remove Email

Application Information:

Title of the Invention	Synthetic Heparin-Binding Growth Factor Analogs		
Attorney Docket Number	30817-1008-CIP	Small Entity Status Claimed	<input checked="" type="checkbox"/>
Application Type	Nonprovisional		
Subject Matter	Utility		
Suggested Class (if any)		Sub Class (if any)	
Suggested Technology Center (if any)			
Total Number of Drawing Sheets (if any)	10	Suggested Figure for Publication (if any)	1

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		Application Number	
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Publication Information:

<input type="checkbox"/>	Request Early Publication (Fee required at time of Request 37 CFR 1.219)
<input type="checkbox"/>	Request Not to Publish. I hereby request that the attached application not be published under 35 U.S.C. 122(b) and certify that the invention disclosed in the attached application has not and will not be the subject of an application filed in another country, or under a multilateral international agreement, that requires publication at eighteen months after filing.

Representative Information:

Representative information should be provided for all practitioners having a power of attorney in the application. Providing this information in the Application Data Sheet does not constitute a power of attorney in the application (see 37 CFR 1.32). Enter either Customer Number or complete the Representative Name section below. If both sections are completed the Customer Number will be used for the Representative Information during processing.			
Please Select One:	<input checked="" type="radio"/> Customer Number	<input type="radio"/> US Patent Practitioner	<input type="radio"/> Limited Recognition (37 CFR 11.9)
Customer Number	05179		

Domestic Benefit/National Stage Information:

This section allows for the applicant to either claim benefit under 35 U.S.C. 119(e), 120, 121, or 365(c) or indicate National Stage entry from a PCT application. Providing this information in the application data sheet constitutes the specific reference required by 35 U.S.C. 119(e) or 120, and 37 CFR 1.78(a)(2) or CFR 1.78(a)(4), and need not otherwise be made part of the specification.					
Prior Application Status	Patented		Remove		
Application Number	Continuity Type	Prior Application Number	Filing Date (YYYY-MM-DD)	Patent Number	Issue Date (YYYY-MM-DD)
10224268	Continuation in part of		2002-08-20	7166574	2007-01-23
Additional Domestic Benefit/National Stage Data may be generated within this form by selecting the Add button.					

Foreign Priority Information:

This section allows for the applicant to claim benefit of foreign priority and to identify any prior foreign application for which priority is not claimed. Providing this information in the application data sheet constitutes the claim for priority as required by 35 U.S.C. 119(b) and 37 CFR 1.55(a).			
Remove			
Application Number	Country ⁱ	Parent Filing Date (YYYY-MM-DD)	Priority Claimed
			<input checked="" type="radio"/> Yes <input type="radio"/> No
Additional Foreign Priority Data may be generated within this form by selecting the Add button.			

Assignee Information:

Providing this information in the application data sheet does not substitute for compliance with any requirement of part 3 of Title 37 of the CFR to have an assignment recorded in the Office.
Assignee 1

Application Data Sheet 37 CFR 1.76		Attorney Docket Number	30817-1008-CIP
		Application Number	
Title of Invention	Synthetic Heparin-Binding Growth Factor Analogs		

If the Assignee is an Organization check here. <input checked="" type="checkbox"/>			
Organization Name	BioSurface Engineering Technologies, Inc.		
Mailing Address Information:			
Address 1	9430 Key West Avenue, Suite 220		
Address 2			
City	Rockville	State/Province	MD
Country	US	Postal Code	20850
Phone Number		Fax Number	
Email Address			
Assignee 2			
If the Assignee is an Organization check here. <input checked="" type="checkbox"/>			
Organization Name	Brookhaven Science Associates		
Mailing Address Information:			
Address 1	P.O. Box 5000		
Address 2			
City	Upton	State/Province	NY
Country	US	Postal Code	11973
Phone Number		Fax Number	
Email Address			
Additional Assignee Data may be generated within this form by selecting the Add button.			

Signature:

A signature of the applicant or representative is required in accordance with 37 CFR 1.33 and 10.18. Please see 37 CFR 1.4(d) for the form of the signature.					
Signature	/Janeen Vilven/			Date (YYYY-MM-DD)	2009-09-14
First Name	Janeen	Last Name	Vilven	Registration Number	47156

This collection of information is required by 37 CFR 1.76. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 23 minutes to complete, including gathering, preparing, and submitting the completed application data sheet form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. **SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.**